



# HUMAN RESOURCES DEPARTMENT

**SARAH ESKE, DIRECTOR**

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## MEMORANDUM

DATE: November 1, 2016  
TO: Employees Eligible to Participate in the FSA Benefit (Section 125 Plan)  
FROM: Sarah Eske  
SUBJECT: Enrollment Opportunity for 2017 Participation

Enclosed is an enrollment form that will allow you to make your decision about participation in the Dodge County Flexible Spending Account (FSA) Benefit plan. The following additional important plan information is available on the Dodge County website. [Click Here: Section 125 Flexible Benefit Plan:](#)

- **United Healthcare** Flexible Spending Account Enrollment Form
- **United Healthcare** Authorization for Direct Deposit
- **United Healthcare** Eligible Expenses
- **United Healthcare** Commonly Asked Flex Benefit Plan Questions
- **United Healthcare** Commonly Asked Health Care Spending Card Questions (Debit Card)

If you do not have access to a computer, contact Leann Schultz, ext. 3523 or Bethany Castleberg, ext. 3237 to obtain copies of these documents.

Please determine whether you wish to participate in the plan and return the completed form by **4:00 p.m. Wednesday, November 18, 2016**. Clearview employees should return their forms to the Human Resources Office at Clearview. Highway Department employees should return their forms to the Highway Office. All other employees should return their forms to the Human Resources Office in the Administration Building.

**Enrollment forms must be turned in by 4:00 p.m. on November 18, 2016 even if you are choosing to not participate.**

**Health Care Spending Card.** Current card holders will continue to use the card they now have.

Participants who only enroll in the Dependent Daycare FSA must request a debit card if they wish to have one.

**Grace Period.** I would also remind you that if you are currently participating in the Flexible Spending Health Care Benefit, our plan offers a grace period of 2 ½ months after the end of the year to submit claims incurred during 2016 up through March 15, 2017. All claims for the 2016 benefit year (including those incurred from January 1, 2017 through March 15, 2017 using unexpended 2016 FSA account funds) must be submitted on or before March 31, 2017. If you do have funds remaining in your FSA Medical account on December 31, 2016 make sure you submit any claims incurred before March 15, 2017 as a claim against your 2016 account.

We will also offer the grace period at the end of the 2017 benefit year.

**Benefits upon termination.** You have 90 days following the termination of your employment to submit claims incurred while you were participating (claims incurred prior to termination).

For calculation purposes, all FSA Health Care and Dependent Care annual elections are based on deductions taken on 26 pay periods. In 2017, the maximum yearly contribution amount allowed is \$2550 which calculated is a bi-weekly contribution amount of \$98.07.

If you have any questions please contact Leann Schultz ext. 3523, or Bethany Castleberg, ext. 3237 Insurance and Benefits Coordinators.